04/17/2009 12:37

(Rev. 12/2004)

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### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines **ORRINPAC** 175 S. WEST TEMPLE, SUITE 650 ADDRESS (number and street) Check if different than previously UT SALT LAKE CITY 84101 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00235572 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 0 1 2009 0 1 3 1 2009 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. STANLEY R. DE WAAL Type or Print Name of Treasurer Electronically Filed by STANLEY R. DE WAAL 04 16 2009 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** 

FE6AN026

Use

Only

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name **ORRINPAC** <sup>®</sup> D " D 0 1 0 1 2009 0 1 3 1 2009 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2009 146667.45 January 1 (b) Cash on Hand at 146667.45 Begining of Reporting Period ..... 5134.67 5134.67 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 151802.12 151802.12 6(a) and 6(c) for Column B) ..... 18183.06 18183.06 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 133619.06 133619.06 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D) ..... 0.00 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name ORRINPAC

Report Covering the Period:

м м 0 1

From:

01

<sup>Y</sup> 2 0 0 9 9

-<sub>0</sub>.

м м 0 1 <sup>D</sup> 3 1

<sup>Y</sup> 2009

I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:		
	(a) Individuals/Persons Other		
	Than Political Committees	0.00	0.00
	(i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized		0.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	5000.00	F000 00
	(such as PACs)	5000.00	5000.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	5000.00	5000.00
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
		0.00	0.00
3.	All Loans Received		
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
6.	Refunds of Contributions Made		
	to Federal candidates and Other		
	Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	134.67	134.67
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(116111 661166616 7.16)		
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d),	5104.07	F404.03
	12, 13, 14, 15, 16, 17, and 18(c))	5134.67	5134.67
0.	Total Federal Receipts (subtract Line 18(c) from Line 19)	5134.67	5134.67

23.

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

(i) Federal Share.....

(ii) Non-Federal Share.....

Expenditures.....

Committees.....

Federal Candidates/Committees.....and Other Political Committees.....

26. Loan Repayments Made.....

(b) Political Party Committees(c) Other Political Committees

(d) Total Contribution Refunds

29. Other Disbursements.....

30. Federal Election Activity (2 U.S.C 431(20))(a) Shared Federal Election Activity

(i) Federal Share .....

With Federal Funds ......(c) Total Federal Election Activity (add

31. Total Disbursements (add Lines 21(c), 22,

32. Total Federal Disbursements

from Line 31).....

23, 24, 25, 26, 27, 28(d), 29 and 30(c))..

(subtract Line 21(a)(ii) and Line 30(a)(ii)

Lines 30(a)(i), 30(a)(ii) and 30(b))....

(from Schedule H6)

Than Political Committees .....

(such as PACs) .....

(add Lines 28(a), (b), and (c)) .........

(add 21(a)(i), (a)(ii) and (b))............

**II. DISBURSEMENTS** 

(a) Shared Federal/Non-Federal Activity (from Schedule H4)

(b) Other Federal Operating

22. Transfers to Affiliated/Other Party

Contributions to

24. Independent Expenditure

Loans Made......

 Refunds of Contributions To:
 (a) Individuals/Persons Other

(c) Total Operating Expenditures

21. Operating Expenditures:

of Disbursements Page 4 **COLUMN A COLUMN B Total This Period** Calendar Year-to-Date 0.00 0.00 0.00 0.00 8183.06 8183.06 8183.06 8183.06 0.00 0.00 10000.00 10000.00 18183.06 18183.06

18183.06

18183.06

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### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	5000.00	5000.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	5000.00	5000.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8183.06	8183.06
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	8183.06	8183.06

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 10 (check only one)  11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements mor for commercial purposes, other than using the name and a	nay not be sold or used by any perso address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) ORRINPAC		
Full Name (Last, First, Middle Initial)  ELI LILLY AND COMPANY PAC  Mailing Address LILLY CORPORATE CENTER  DROP CODE 1014  City State	Zip Code	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
rederal political confinitiee.	46285 00082792	Amount of Each Receipt this Period  5000.00  Receipt
Name of Employer  Receipt For:  Primary  Other (specify)   Aggrega	ate Year-to-Date ▼	- Troope

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	5000.00
TOTAL This Period (last page this line number only)	<b>•</b>	5000.00

ry Information copied from such Reports and Statement for commercial purposes, other than using the name at NAME OF COMMITTEE (In Full) ORRINPAC  Full Name (Last, First, Middle Initial) CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL  City State SALT LAKE CITY Purpose of Disbursement Accounting fees Candidate Name  Office Sought: House Disbursement Senate	Use separate schedule(s)			JLE B (FEC Form 3X)  Use separate schedule(s)  FOR LINE NUMBER: (about anti-one)		10		
for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) ORRINPAC  Full Name (Last, First, Middle Initial) CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL  City State: District: Full Name (Last, First, Middle Initial) Office Sought: House Disbursement Senate President State: District: Full Name (Last, First, Middle Initial) CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL  City State: State: District: Full Name (Last, First, Middle Initial) CBIZ MHM, LLC	for each category of the Detailed Summary Page	X 21b	only one) 22 28a	23 28b	$\exists$	24 28c	25 29	2
NAME OF COMMITTEE (In Full) ORRINPAC  Full Name (Last, First, Middle Initial) CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL  City States SALT LAKE CITY UT Purpose of Disbursement Accounting fees Candidate Name  Office Sought: House Disbursement Senate President State: District:  Full Name (Last, First, Middle Initial) CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL  City States								
Full Name (Last, First, Middle Initial) CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL  City State: District:  Full Name (Last, First, Middle Initial) CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL  District: District:  Full Name (Last, First, Middle Initial) CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL  City Sta	nd address of any political o	committee to	o solicit contribu	itions fro	m s	such co	ommittee	<del></del>
CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL  City State: 175 SOUTH WEST TEMPL  Office Sought: UT  State: District: District: District: VEIL Name (Last, First, Middle Initial)  CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL  City State: State: State: VEIL Name (Last, First, Middle Initial)  CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL  City State: State: State: VEIL Name (Last, First, Middle Initial)  CBIZ MHM, LLC								
City State: District:  Full Name (Last, First, Middle Initial) CBIZ MHM, LLC  Mailing Address  SALT LAKE CITY UT Purpose of Disbursement Accounting fees Candidate Name  Disbursement Senate President President District:  Full Name (Last, First, Middle Initial) CBIZ MHM, LLC  Mailing Address  175 SOUTH WEST TEMPL City Sta			Transac Date of I	Disburse	mer	-	E1919	
SÁLT LAKE CITY  Purpose of Disbursement Accounting fees Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL City Sta	E, SUITE 650		01	<sup>/</sup> 0	5	/ Y	žoŏ	9
Accounting fees Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL  City Sta			Amount	of Each	Disk	burser	ment this	Period
Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL  City Sta			71 L.				716.	31
Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL City Sta								
Senate President District:  Full Name (Last, First, Middle Initial) CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL City Sta		Category/ Type						
CBIZ MHM, LLC  Mailing Address 175 SOUTH WEST TEMPL  City Sta	ent For: rimary General ther (specify) ▼		ACCOU	NTING	FE	EES		
City Sta			Transac Date of I		_	-	.E1920	
	E, SUITE 650		01	/ <b>1</b>	5	/ Y	žoŏ	9 <sup>Y</sup>
			Amount	of Each I	Dist	burser	ment this	Period
Purpose of Disbursement			7 L				831.	58
Accounting fees  Candidate Name		Category/ Type						
	ent For: rimary General ther (specify)	71-	ACCOU	NTING	FE	ES		
Full Name (Last, First, Middle Initial) North Capitol Street Enterprises			Transac Date of I		_	-	E1921	
Mailing Address 400 North Capitol Street, N' Suite 585	W		0 1 M	<sup>/</sup> 0	<b>5</b>	/ Y	žoŏ	9 <sup>Y</sup>
City Sta			Amount	of Each	Disk	burser	ment this	Period
WASHINGTON DO Purpose of Disbursement	20001-						849.	32
Office rent and phone								
Candidate Name								
	ent For: rimary General		OFFICE	RENT	A٨	ND PH	HONE	
SUBTOTAL of Disbursements This Page (optional)	ther (specify)							
OTAL This Period (last page this line number only)		1	<u> </u>		_		2397.7	71

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 8/10
ITEMIZED DISBURSEMENTS	for each category of the	(check only		24
	Detailed Summary Page	X 21b 27	22 23 28b 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
ORRINPAC				
Full Name (Last, First, Middle Initial) North Capitol Street Enterprises			Transaction ID: 9 Date of Disburseme	
Mailing Address 400 North Capitol Street, Suite 585	NW		01 / 15	2009
	State Zip Code DC 20001-		Amount of Each Dis	bursement this Period
Purpose of Disbursement Office rent and phone		0 0		856.40
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		OFFICE RENT AN	ND PHONE
Full Name (Last, First, Middle Initial)			Transaction ID: 9	0211.E1923
WILLIAMS & JENSEN			Date of Disburseme	
Mailing Address 1155 21ST STREET, NW	1		01 05	2009
,	State Zip Code DC 20036-		Amount of Each Dis	bursement this Period
Purpose of Disbursement Legal fees				4718.94
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify) ▼		LEGAL FEES	
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: 9	0211 E1025
ZIONS BANK			Date of Disburseme	
Mailing Address 310 SOUTH MAIN ST			01	2009
	State Zip Code UT 84101-		Amount of Each Dis	bursement this Period
Purpose of Disbursement Service fee		•		169.06
Candidate Name		Category/ Type		
Senate	ment For: Primary General	Туре	SERVICE FEE	
State: President State:	Other (specify) ▼			
SUBTOTAL of Disbursements This Page (optional) .				5744.40

TOTAL This Period (last page this line number only) .....

State:

A.

District:

SCHEDULE B (FEC Form 3X)	Use separate schedule(s) (check on			LINE NUMBER: PAGE 9/10							
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	H	22 28a	23 28l	, F	24 28c		25 29		26 30b
Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name											
NAME OF COMMITTEE (In Full) ORRINPAC											
Full Name (Last, First, Middle Initial) ZIONS BANK				Date o	action of Disbu		ent		924 0 ŏ 9	Υ	
Mailing Address 310 SOUTH MAIN ST				0 1		3 1		. 2	009		
•	State Zip Code UT 84101-			Amou	nt of Ea	ch D	isburse	emen	t this P	erio	d
Purpose of Disbursement Merchant fees						-		-	40.95		
Candidate Name	C	ategory/ Type									
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify)			MERC	HANT	FEI	≣S				

		40.05
SUBTOTAL of Disbursements This Page (optional)	<b>&gt;</b>	40.95
TOTAL This Period (last page this line number only)	•	8183.06

В.

District: 00

President

19e# 2993300930			
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 10 / 10
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and States or for commercial purposes, other than using the nan			
NAME OF COMMITTEE (In Full) ORRINPAC			
Full Name (Last, First, Middle Initial) BENNETT ELECTION COMMITTEE			Transaction ID: 90211.E1917 Date of Disbursement
Mailing Address 175 SOUTH WEST TEN SUITE 650	MPLE		$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 & 7 \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{bmatrix}^Y \end{bmatrix}$
City SALT LAKE CITY	State Zip Code UT 84101-		Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION TO PRIMARY 2010			5000.00
Candidate Name ROBERT F BENNETT		Category/ Type	
	ement For: 2010  ( Primary General Other (specify)		CONTRIBUTION TO PRIMARY 2010
Full Name (Last, First, Middle Initial) BENNETT ELECTION COMMITTEE			Transaction ID: 90211.E1918 Date of Disbursement
Mailing Address 175 SOUTH WEST TEN SUITE 650	MPLE		$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} Y$
City SALT LAKE CITY	State Zip Code UT 84101-		Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION TO GENERAL 2010			5000.00
Candidate Name ROBERT F BENNETT		Category/ Type	
Office Sought: House Disburs	ement For: 2010 Primary X General		CONTRIBUTION TO GENERAL 2010

Other (specify)

SUBTOTAL of Disbursements This Page (optional)	•	10000.00
TOTAL This Period (last page this line number only)	<b>•</b>	10000.00

State: UT